



Please type a plus sign (+) in this box ☐

PTO/SB/51S (06-00)
Approved for use through 09/30/2000. OMB 0651-0033
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

#5
Shaw
11-1500

**SUPPLEMENTAL DECLARATION
FOR REISSUE
PATENT APPLICATION
TO CORRECT "ERRORS" STATEMENT
(37 CFR 1.175)**

Attorney Docket Number	USPL-33RE
First Named Inventor	Jacob Moskovich
COMPLETE	
Application Number	09/305,780 ✓
Filing Date	April 28, 1999
Group Art Unit	2873
Examiner Name	S. Sugarman

I/We hereby declare that:

Every error in the patent which was corrected in the present reissue application, and which is not covered by the prior oath(s) and/or declaration(s) submitted in this application, arose without any deceptive intention on the part of the applicant.

I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jacob		Moskovich	
Inventor's Signature	Date		10/23/00
Name of Second Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Name of Third Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Give Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Name of Fourth Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Give Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

[Page 1 of 1]

Burden Hour Statement: This form is estimated to take 0.03 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

RECEIVED
NOV 13 2000
MAIL ROOM
TC 2873